Dedham parks & recreation department Ju ju's place Fall swim lessons

Saturdays of January 24th thru March 19, 2011 Weekdays (10 weeks) January 10th – March 17th

| Name | | e birth date | |
|-----------------------------|--|-------------------------------------|-----------------------|
| Address | | _townzip | |
| Parent/ guardians name | | tel# | |
| Have you eve | er taken lessons at the Dedham pool? | Yes no | |
| Program run | s eight (8) weeks | | |
| Week day | | | |
| \$50.00 | \$40.00 with a pool membership | | |
| \$55.00 | \$45.00 Dedham residents without a | embership | |
| \$60.00 | \$50.00 non-residents without a men | pership | |
| | idents registration begins Monday, augu | | |
| Non-residen | ts registration begins Monday, august 2 | d | |
| Please circle | desired class | | |
| Kinderswim I (ages 2-3) | | Red Cross level I primary be | <u>eginners</u> |
| Mondays 8:00-8:45am | | primary beginners | |
| | ays 8:00-8:45am | Saturdays 10:00-11:0 | 0am |
| Wedne | esdays 8:00-8:45am | Saturdays 11:00-12 | 2:00am |
| Thursd | lays 8:00-8:45am | | |
| | | Red Cross level III | |
| Kinderswim II (ages 3-4) | | stroke readiness (adv beg) | |
| | ays 9:00-9:45am | Saturdays 10:00-11:00 | |
| | ays 9:00-9:45am | Saturdays 11:00-12:00 | am |
| | esdays 9:00- 9:45am | | |
| Thursd | lays 9:00-9:45am | Red Cross level IV | |
| | | <u>`stroke development</u> | |
| | III (ages 4-5) | <u>intermediate</u> | |
| | ays 10:00-10:45am | Saturdays 12:00-1:00լ | om |
| | ays 10:00-10:45am | | |
| | esday 10:00-10:45am | Red Cross level V | |
| Thursd | lays 10:00-10:45am | stroke refinement | |
| | | <u>swimmer</u> | |
| Kinderswim III (ages 4 & 5) | | Saturdays 12:00-1:00 | pm |
| Saturd | ays 9:00-10:00am | | |
| | | Red Cross level VI | |
| | vel I (ages 5 & 6) | <u>skill proficiency</u> | |
| Saturd | ays 9:00-10:00am | adv swimmer | |
| | | Saturdays 12:00-1:00 | pm |
| Ry my signat | ture, i hereby release the town of Dedha | n narks & recreation denartment f | rom any liahility ro |
| Dy IIIY SIBIIAL | iuie, i licieny icicase tile town di Deuna | i, paiks & iecieation departitent i | TOTH ATTY HADIIILY IS |

Parent/guardian signature______ date_____

injury while participating in this program.